

Best Available Copy

CLAIMS ONLY						Application Number <i>09/768904</i>	Filing Date	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	4							
Total Depend	18							
Total Claims	22							

  

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